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UTILITY PATENT APPLICATION TRANSMITTAL

Signature

Attorney Docket No.	DCS-9176						
First Inventor	Lee, et al.						
Title	Method for Selectively						
Common Adail I abad Ala	FII 137396432 IIS						

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Mail Stop Patent Application APPLICATION ELEMENTS Commissioner for Patents ADDRESS TO: P.O. Box 1450 See MPEP chapter 600 concerning utility patent application contents. Alexandria VA 22313-1450 1. X Fee Transmittal Form (e.g., PTO/SB/17) 7. CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) 2. 🔲 Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) 3. X Specification [Total Pages_ Computer Reader Form (CRF) (preferred arrangement set forth below) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D i. CD-ROM or CD-R (2 copies); or - Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Paper - Brief Summary of the Invention - Brief Description of the Drawings (if filed) Statements verifying identity of above copies - Detailed Description ACCOMPANYING APPLICATION PARTS - Claim(s)
- Abstract of the Disclosure 9. L Assignment Papers (cover sheet & document(s)) 4. X Drawing(s) (35 U.S.C. 113) [Total Sheets _ Nower of 10. 37 CFR 3.73(b) Statement (when there is an assignee) Attorney 11. 5. Oath or Declaration [Total Sheets English Translation Document (if applicable) a. X Newly executed (original or copy) Copies of IDS Information Disclosure 12. Statement (IDS)/PTO-1449 Citations b. Copy from a prior application (37 CFR 1.63(d)) Preliminary Amendment (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) 14. X (Should be specifically itemized) **DELETION OF INVENTOR(S)** 15. Certified Copy of Priority Document(s) Signed statement attached deleting inventor(s) (if foreign priority is claimed) name in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. 🔲 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Divisional Continuation-in-part (CIP) Continuation of prior application No.: Prior application informalion:

Examiner

Art Unit:

For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.

The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number: OR Correspondence address below Name PATENT TRADEMARK OFFICE Address City State Zip Code Country Telephone Fax Registration No. (Attorney/Agent) Name (Print/Type) Garpenter 40,409

This collection of information is required by 37 FR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing the should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (05-03)
Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
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FEE TRANSMITTAL			Complete if Known						
FEE INANSMITTA	L	Application Number							
for FY 2003			Filing Date Ju.			ly 18, 2003			
Effective 01/01/2003. Patent fees are subject to annual revision.		First Named Inventor Lee			tor Lee	et al.			
		Examiner Name							
Applicant claims small entity status. See 37 CFR 1.27		Art Unit							
TOTAL AMOUNT OF PAYMENT (\$) 750.00	Attorney Docket No. DCS				lo. DCS	-9176			
METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)								
Check Credit card Money Other None	3. ADDITIONAL FEES								
X Deposit Account:	<u>Large</u> Fee	Large Entity Small Entity Fee Fee Fee Fee Fee Fee Fee Fee Fee Fe							
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Name The Director is authorized to: (check all that apply)	1053		1053		= '	English specification			
X Charge fee(s) indicated below X Credit any overpayments	ł	2,520	}	•			rte reexamination	<u> </u>	
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1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of App	eal			
1003 520 2003 260 Plant filing fee	1402		2402		Filing a brief in	* *	n appeal		
1004 750 2004 375 Reissue filing fee	1403		2403		Request for or	-			
1005 160 2005 80 Provisional filing fee		1,510	1			n to institute a public use proceeding			
SUBTOTAL (1) (\$)750.00	1452		2452			on to revive - unavoidable			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453		Petition to rev				
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1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	3/5	(37 CFR 1.12	a submission after final rejection FR 1.129(a))			
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 ** Reissue independent claims	1810	750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))							
over original patent		1 750	1 '''						
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	1802 900 1802 900 Request for expedited examination of a design application							
SUBTOTAL (2) (\$)		Other fee (specify)							
						. (3) (\$)			
SUBMITTED BY (Complete (if applicable)									
Name (Print/Type) Robert N. Carpenter		Registration No. 40,409				Telephone{	Telephone847-267-5351		
Signature Notest Caracter		, 1115Y/				Date	7/18/03		

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